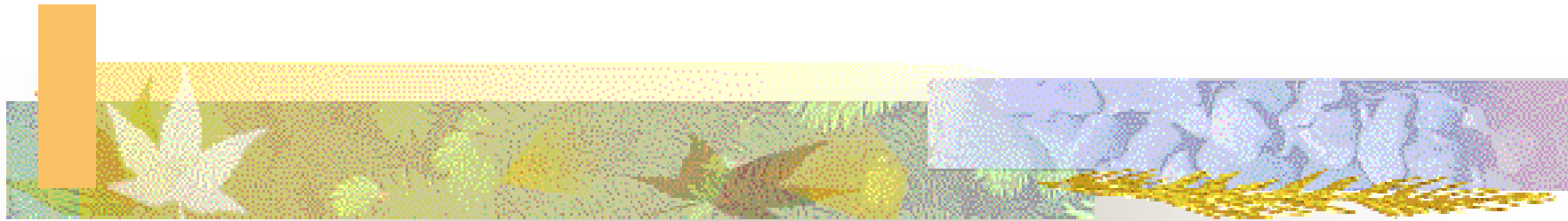


Delta Rural Hospital Performance Improvement (RHPI) Project



Terry Hill, Project Director

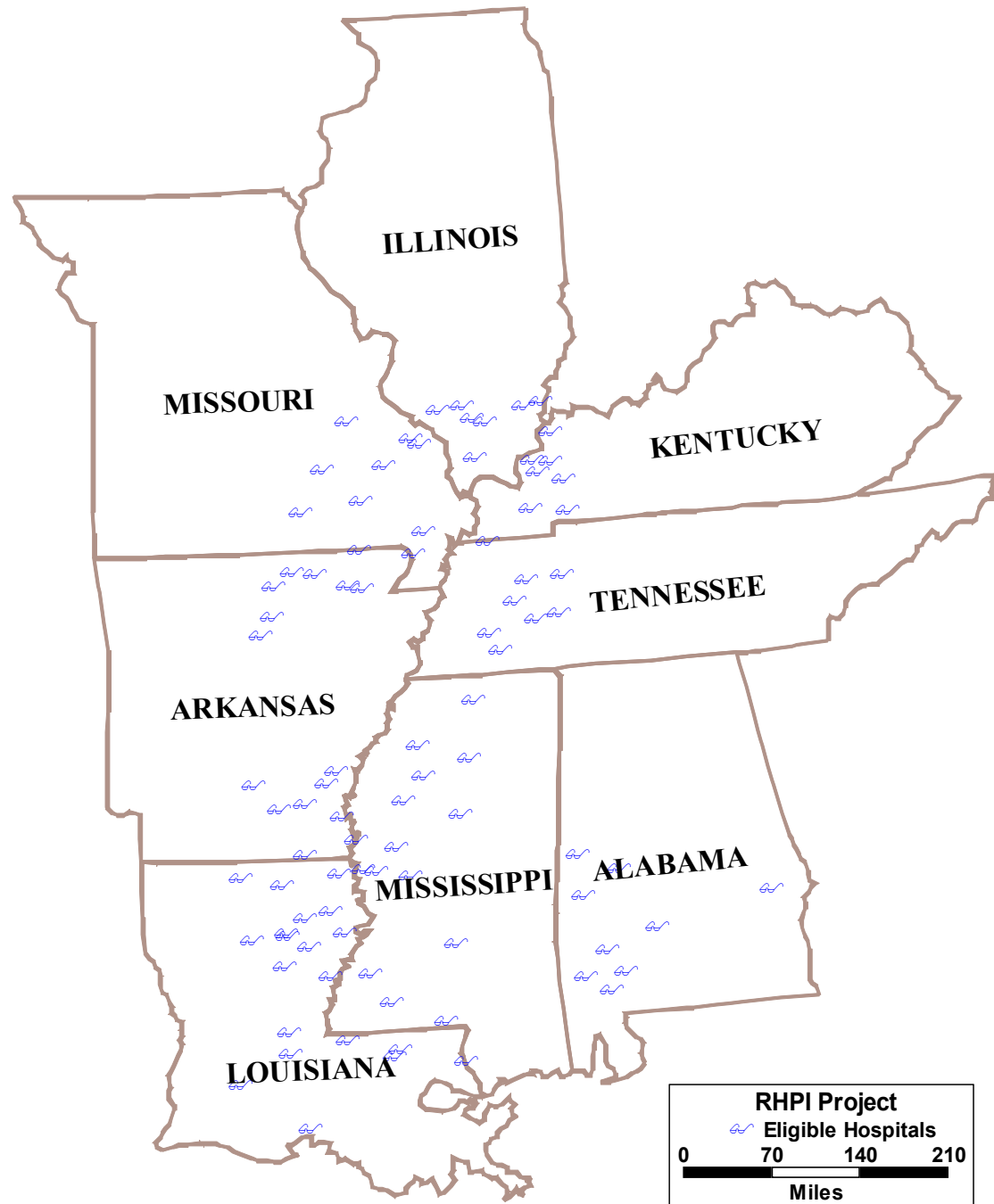
Funded by the HRSA Office of Rural Health Policy



Agenda

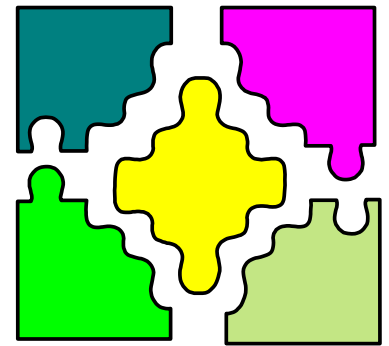
- Map of Delta Region
- RHPI Partnerships
- Historical Challenges/Opportunities
- RHPI Principles and Outcomes (initial)
 - Technical assistance
 - Tools
 - Capacity building
- Future Direction

Mississippi Delta States



Partnerships

- A track record of working in rural health:
 - HRSA Office of Rural Health Policy
 - National Rural Health Resource Center
 - Mountain States Group, Inc.
 - Stroudwater Associates
 - Oklahoma State University
 - State health organizations





RHPI Focus on Long Term Success

- Rural hospitals require more than payment reform to sustain operations long term
 - Strong leadership from board & administration
 - Fiscal soundness
 - Operational effectiveness
 - “Goodness of fit” with community needs

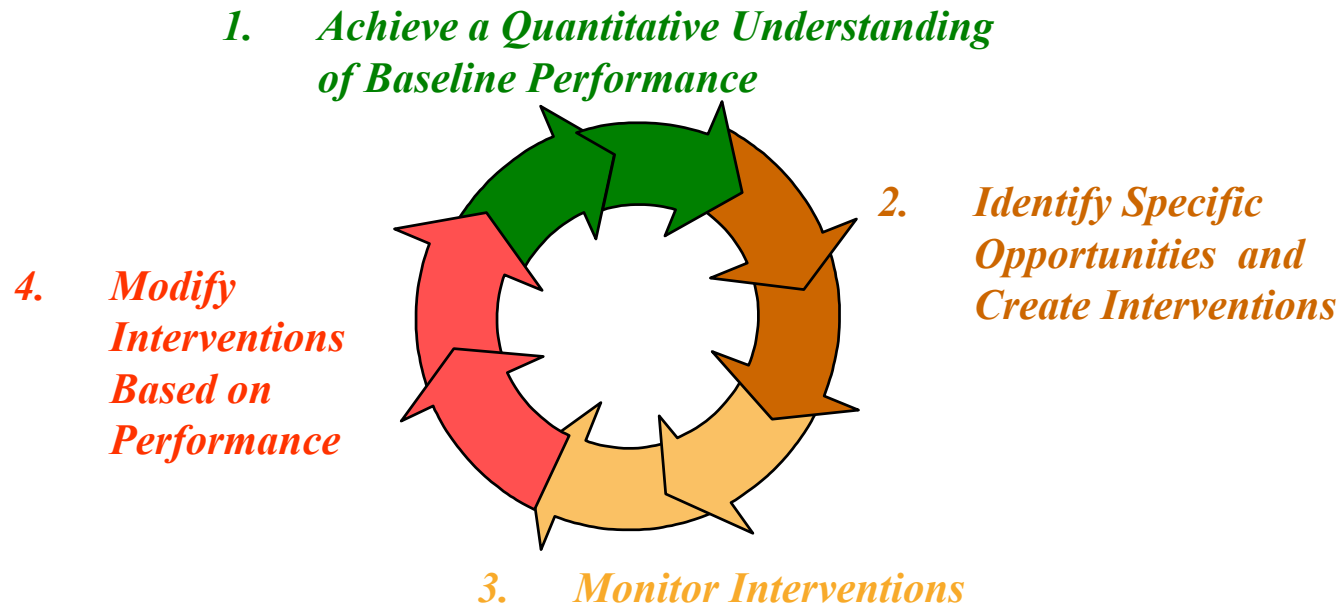


What is Performance Improvement?

- Technical assistance
 - RHPI contracting with consultants to address specific hospital needs
- Business tools and databases
 - RHPI includes development & dissemination
- Capacity building
 - RHPI builds state, regional & local capacity to assist rural hospitals

Technical Assistance

- Employs both comprehensive & targeted performance improvement approaches





Performance Improvement

- Clinical Service Analysis
 - Inpatient
 - Outpatient/ancillary
 - Provider Supply
- Financial/Reimbursement
 - Medicare Hospital Designations
 - Business Office Functionality
 - External Funding Sources



Performance Improvement

- Financial – Expense Management
 - Cost Management Approaches
 - Staffing/Compensation Analysis
- Physician Practice Management
 - Payment Methodologies and Models
 - Benchmarking Resources
 - Provider Compensation
 - Fee Schedule and Coding
 - Practice Volume and Throughput
 - Staffing



Performance Improvement

- Community Perception/Engagement
 - Market Awareness
 - Quality Perception
 - Priorities and Expectations
- Organizational Architecture and Management Principles
 - Leadership
 - Level of Decision Making
 - Compensation
 - Performance Feedback
 - Malcolm Baldrige



Technical Assistance

- Outcomes to date
 - Successful hospital consultations in all eight states
 - Comprehensive and targeted
 - Multiple resources leveraged for implementation support
 - As implementation continues, additional outcomes in next 3-6 months
 - On-going hospital interest



Observations and Issues

- Rural hospital administrators do not have access to performance tools or certain types of business expertise
- Needed information system capacity is often lacking
- The public's perception of rural hospital quality generally is low
- Comparative data that helps hospitals target improvement does not exist



Observations and Issues

- Rural hospitals often fail to make the needed investments necessary to survive
- Rural hospitals are not collecting all of the payments owed to them
- Rural hospitals have significant work force issues including lack of physicians, nurses and other key personnel.



Business Tools

- Making hospital business tools & data for benchmarking publicly available
 - Service/ program feasibility analyses
 - Clinical service line
 - Balanced Scorecard
 - National performance improvement data bases
- Outcomes to date
 - Agreements to share tools & information
 - Initial inventory of tools completed
 - Interactive RHPI web site

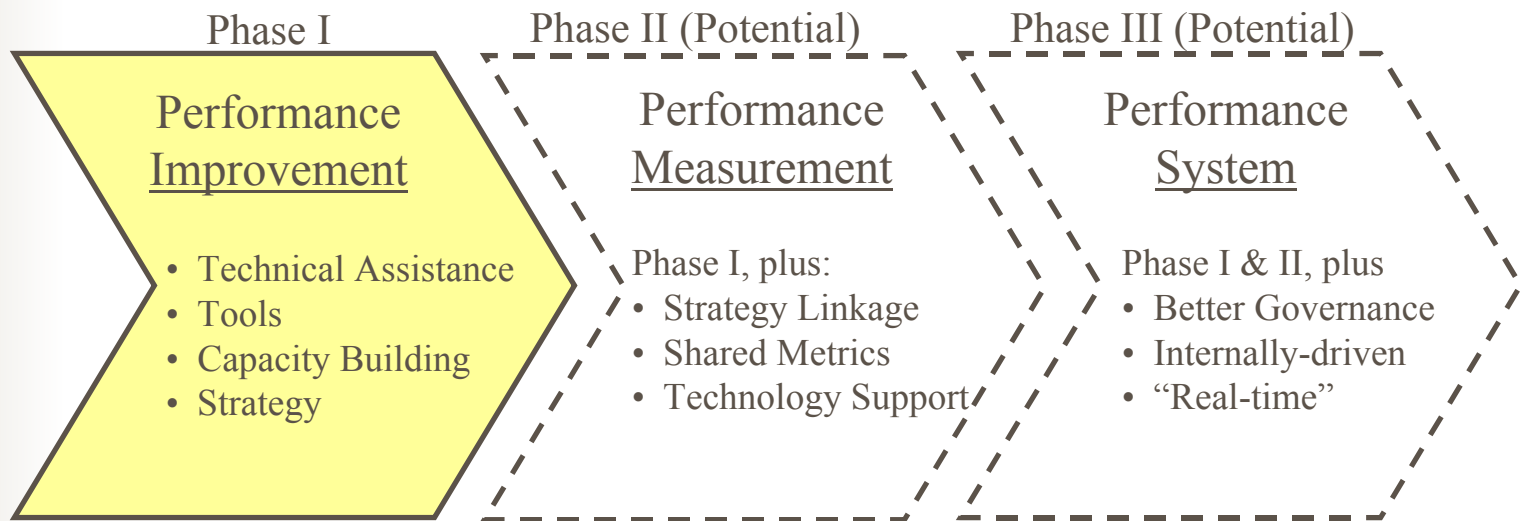


State & Regional Capacity

- State offices of rural health, state hospital associations & primary care associations are advisory to the project
- Outcomes to date
 - Informational meetings in all states
 - Help in marketing the program
 - Assist in hospital selection process
 - Identify resource people to be trained

Future Direction

- The evolution toward a more sustainable rural delivery system includes additional considerations:



Questions?

